

TriForce Mission Team
Vandalia, IL
Mission Trip July 8, 2018 – July 14, 2018

Teen Registration Form

Full Name _____ Phone _____
Address _____ City/State _____
School _____ Grade _____ Date of Birth _____
Parent email _____ Shirt Size _____
Teen Email _____ Parent, please initial approval of teen to receive emails _____

Registration: Registrations are accepted in the order in which they are received. This completed registration form and \$75 registration fee reserves your space for the mission trip. Once all spots are full, names will be accepted for a waiting list. You will be notified if your registration is received after spots are filled and you are placed on the waiting list.

Cost: Each participant is responsible for the **\$650** Group Workcamp Fee, transportation and miscellaneous costs (food when traveling, t-shirt, day off activities, etc.). A **\$75.00 non-refundable deposit** MUST accompany this registration form. If the \$75 deposit will cause a hardship for the family, please contact Carrie or Dave. Additionally, each participant is asked to obtain at least **\$100 in personal sponsorship** toward his or her account. The balance of \$475 can be earned by additional personal sponsorship, group fundraisers, or by paying the balance directly. Each participant's balance will be kept track of, but for your records, please use the tracking sheet available for download on the team website. If your trip balance has not been met by April 1, 2018, you will be notified of the remaining balance. **All trip balances are expected to be met by May 15, 2018.**

Teen Participant Expectation Throughout the Year:

- The TriForce Mission TEAM is a team. Like all sports, academic, or other teams, you must make the practices to play in the game. Team members are required to attend monthly meetings and the events and fundraisers. The meetings help prepare everyone physically, mentally, and spiritually. The events and fundraisers help build friendships and raise money.
- Attendance will be taken at each meeting, but keep track of your attendance in your folder. Unexcused absences may result in loss of your space for the trip.
- Each teen is urged to participate in Youth Ministry programs offered by our connected parishes.
- Each teen is expected to participate in service events with the Team throughout the year. These may include Called 2 Serve (1 day local missions), parish events, and local service projects. Opportunities for these will be emailed to the email address(es) provided above.
- Each teen is required to attend weekly Sunday Mass and Holy Days of Obligation.

Teen Expectations During Mission Trip:

- 100% participation in all programs. Be on time and participate in all evening devotions.
- Mass attendance when required by the adult leaders.
- No cell phones used during any of the programs. If you talk, text or play on them, your phone will be taken by an adult leader and returned at the end of the trip.
- All participants are expected to be in their sleeping spots and quiet by "lights out" at 11:00pm.
- Cell phones off at 11:00pm (when lights are out).
- No teen is permitted to leave the school campus at any time, except to your work site. If you need something, check with an adult leader, and they will get it for you.
- All teens will sign and adhere to the Code of Conduct as well as all rules set forth by the Youth Minister(s), Archdiocese of Indianapolis, and the connected parishes.

Parent Expectations:

- The TriForce Mission Team relies heavily on parental involvement to make our program a success. As a parent, you will be asked to assist with various fundraising projects, service projects, and chaperoning of events.
- All parents who help with youth activities MUST complete the Safe and Sacred online program, have a current (within 3 years) background check on file at the parish office, and have signed a Code of Conduct as required by the Archdiocese of Indianapolis.

Teen Code of Conduct:

1. I agree to respect the rights and property of others. I understand that neither vandalism nor stealing will be tolerated. Financial obligations resulting from such behavior will be my, and my family's, sole responsibility.
2. I agree to respect adult leaders and other participants.
3. I agree to demonstrate Christian values by my language and behavior.
4. I will not participate in games such as Truth or Dare, Spin the Bottle, Would you Rather or other such games that may lead to inappropriate behavior.
5. I understand that the following behavior is appropriate conduct.
 - One armed side hugs
 - Handshakes
 - Arms around shoulders
 - Verbal praise
 - High fives and hand slapping
 - Hold hands during prayer
6. I understand that the following behaviors are samples of inappropriate conduct. Please note that this list is not inclusive.
 - Kissing
 - Verbal sarcasm
 - Any form of unwanted affection
 - Inappropriate touching
 - Massages of any kind
 - Comments that relate to a youth's body.
7. I agree not to possess any drugs, tobacco, alcohol, fireworks, matches, cigarette lighters, knives, or items that would endanger people, pets, wildlife, or property, or are illegal.
8. **I agree to dress appropriately. I understand that this prohibits short shorts, tank tops, any clothing that exposes mid-drift or undergarments, or that has any reference to profanity, tobacco or alcohol products including insignias or advertisements. (When an event may allow for a bathing suit or other such attire, this may be done modestly and in good taste.)**
9. I will act as a lady or gentleman and refrain from any profanity or inappropriate language or behavior.
10. I will not leave an event, unless my adult leader grants permission.
11. I will not use my cell phone, or other electronic device during Mission Team meetings or events. During the mission trip, I will not use such electronic devices at my worksite, during programs, or during devotions.
12. I will be open to building new relationships with my peers and adult leaders.

Participant Agreement: I, as a participant understand and agree to abide by these guidelines. I realize and agree that if I do not abide by these rules, I may lose the privilege of attending a scheduled activity, or may be sent home at the discretion of the adult leader at the expense of my parents. I will be responsible for all consequences of my behavior. I understand that, in some cases, my behavior or actions may be reported to my parents, school principal, and/or other authorities who may need to be aware.

PARTICIPANT Signature _____ Date _____

Parent Permission/Agreement: I, _____ as the parent/guardian of this participant, have read and understand the guidelines, expectations, and Code of Conduct for the TriForce Mission Team participants. I understand that failure to comply with these guidelines may result in my child being excluded from the trip or sent home at my expense. I am interested in being involved with this team and will participate to my fullest ability.

Further, I grant permission for my child _____, to participate in the 2018 TriForce Mission Trip and all team events/activities throughout the 2017-2018 school year. I will not hold St. Louis Catholic Church, St. Anthony's Church, St. Nicholas Church, the Archdiocese of Indianapolis, or their associates or representatives responsible in the event of an illness or injury which occurs during the event, including any which occur at the event site or during transportation to or from the site. I give permission for any adult at the event to perform first aid on my child when necessary and possible, and authorize any adult event leader to obtain and consent to emergency medical treatment in my place in the event I cannot be reached. Further, I agree to accept any and all financial responsibility that may result if medical treatment becomes necessary and from returning home from the event site, if necessary.

PARENT Signature _____ Date _____

TEEN MEDICAL INFORMATION

Name _____ Birth Date _____
Address _____ Age _____ Grade _____
City _____ State _____ Zip _____
Home Phone _____ Emergency Phone _____
Physician Name _____ Dr. Phone _____

HEALTH STATUS (Confidential) Please list any health problems you may have (examples: Asthma, Allergies, Diabetes, Etc.) _____

MEDICATION

Please list all medication (including over the counter and prescription) taken routinely. Bring enough medication to last the entire time at camp. Keep medication in the original bottle that identifies the physician, the name of the drug, the dosage and frequency of administration. Keep all over the counter medication in original packaging. Please list all medication that the participant is taking:

Med #1 _____ Dosage _____ Reason _____
Med #2 _____ Dosage _____ Reason _____

Date of your last Tetanus Booster _____
Personal Medical Insurance Provider _____
Insurance Policy Number _____ Group Number _____
Name of Insured _____ Relationship to participant _____

I (we) am (are) the parent(s) or legal guardian(s) of this participant, and hereby grant my (our) permission for him (her) to participate fully in the mission trip, mission team activities, and Called 2 Serve activities for the 2017/2018 school year. I give permission for my child to be transported in privately owned vehicles or public transportation to and from approved out-of-institute activities. In the case of illness, I hereby give my (our) permission to take said participant to a doctor or hospital and hereby authorize medical treatment, and assume the responsibility of all medical bills, and for the release of medical records to an attending physician. Further, should it be necessary for the participant to return home due to disciplinary action, for medical reason, or otherwise, I (we) hereby assume all transportation cost.

Print Neatly Participants Name

Participants Signature

Print Custodial Parent Name

Custodial Parent Signature

Print Custodial Parent Name

Custodial Parent Signature

For Later Use (Please do not fill out below this line until April 2018)

Initial Date I have reviewed this form and confirm that all information on this form is still accurate or I have made appropriate changes.

PLEASE MAKE A COPY OF INSURANCE CARD AND RETURN WITH THIS FORM

Mission Team member,

In order to make this trip affordable for everyone without adding more fundraisers, we are asking each participant to obtain at least \$100 in personal sponsorship. This can be accomplished by sending the attached letter to friends, family, co-workers, etc; by mowing lawns, babysitting, hosting a bake sale; by asking for sponsorship in lieu of Christmas or Birthday gifts; or by simply writing a check for that amount. This can be done anytime before May 15, 2018.

Please make as many copies of the attached letter as you need. If you need another copy, please ask Carrie. Forms will be available to download on the Triforce Mission Team website as well. Please fill out the "Please Apply to:" line with your name before giving to your friends, family, co-workers, etc. When money is received in your name, it will be applied to your account as personal sponsorship.

If you have any questions about personal sponsorships, please contact Carrie or Dave.

Carrie Wesseler (812) 933-1519

Dave Meyer (812) 934-5457

